

**IN THE UNITED STATES DISTRICT COURT
FOR THE DISTRICT OF KANSAS**

Plaintiff,

Case No. _____

vs.

Defendant(s).

**APPLICATION FOR APPOINTMENT OF COUNSEL
IN AN ACTION UNDER TITLE VII OF THE CIVIL RIGHTS ACT OF 1964,
AS AMENDED, SECTION 2000e-5(f) OF TITLE 42 U.S.C.**

I state that I am without means to employ counsel and that I have been aggrieved by the actions of the defendant(s) in denying me rights and relief under the Civil Rights of 1964, and amendments thereto.

I understand that before the Court will consider appointing an attorney for me, I must have conferred with several attorneys who handle employment discrimination cases in the geographical area in which this case is filed, in an effort to retain my own attorney. I further understand that the Court strongly recommends that I confer with at least five such attorneys.

I state that I have contacted the following attorneys about representing me in this case, but that I have been unable to obtain their services:

- (1) _____
- (2) _____
- (3) _____
- (4) _____
- (5) _____

I acknowledge that I am required to establish that I am financially unable to retain my own attorney and that to do so (1) I must have already filed an Application to Proceed In Forma Pauperis with Supporting Documentation, or (2) I must attach to this Application for Appointment of Counsel an Affidavit of Financial Status.

I have already filed an Application to Proceed In Forma Pauperis.

Yes _____ No _____

OR

I have attached to this Application for Appointment of Counsel an Affidavit of Financial Status.

Yes _____ No _____

I declare under the penalty of perjury that all of the above information in this application is true and correct.

Signature of Plaintiff

Name (print or type)

Address

City

State

Zip Code

Telephone Number

CERTIFICATE OF SERVICE BY MAIL

I, _____, state that I am the plaintiff in this action and that I
(sign your name)

served the attached Application for Appointment of Counsel on

[list the name and address of the attorney(s) for defendant(s), or the
name and address of the defendant(s), if unrepresented]

by depositing a true and correct copy of the Application for Appointment of Counsel in the U.S. Mail,
postage prepaid on _____.
(date)